

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 06/08/2013

Address: 2625 "R" Street

Incident #:

Bedford, In

County: Lawrence

47421

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☒ Residence
☐ Outbuilding
☐ Vehicle
☐ Hotel/Motel
☐ Open – No Structure
☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ Lithium/Ammonia Reaction(s): Kitchen/Living room
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: Kitchen
☒ Water Reactive Metal (Lithium): Bedroom
☐ Hydrochloric Acid Gas Generator(s): _____
☐ Anhydrous Ammonia: _____
☒ Corrosive Acid: Hallway, Bedroom, Kitchen
☒ Corrosive Base: Hallway Bedroom, Kitchen
☐ Other (item and location): _____

Child under age 18 discovered (check appropriate)

- ☐ Yes _____ (number present)
☒ No
☐ Children not present but evidence they reside or visit often
Living conditions of home: ☐ clean ☒ disarray ☒ unclean
Estimated length of time manufacturing had been occurring: Years
Additional Information: _____

This report has been faxed* to the following agencies that serve the location:

Fire Department: Bedford FD

Fax: Email

Health Department: Lawrence County

Fax: Emailed

Department of Child Services: _____

Fax: _____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: Joshua Allen 13ISPC005685

Phone 8123324411

* This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.